



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Michael A. Stetson ) Group No.: Unknown  
Serial No. : 10/612,745 )  
Filing Date : July 2, 2003 ) Examiner: Unknown  
Title : IMPROVED POOL SKIMMER )  
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)

STATUS REQUEST

Commissioner for Patents  
Post Office Box 1450  
Alexandria, Virginia 22313-1450

Dear Sir/Madam:

Upon checking the above-identified case file, it was discovered that the last communication concerning this patent application was our Information Disclosure Statement filed on October 7, 2003.

Please let us know the status of this application at the earliest possible date.

Respectfully submitted,

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Date: April 8, 2004

By:

Customer No.: 007663



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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	2	Attorney Docket Number	STETS-002A
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### ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Return postcard
Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Kit M. Stetina, Esq. STETINA/BRUNDA/CARRED & BRUCKER
Signature	
Date	April 8, 2004

### CERTIFICATE OF TRANSMISSION/MAILING

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Typed or printed name	Josephine I. Weissberger	
Signature		Date
		April 8, 2004

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